AND WARE BY

100	PATEN	T APPLICAT	ION F .ć	DETERN	IINA	ION REC	ORE		pplica	5	Docket N	Imber :
1000	CLAIMS AS FILED - PART I (Column 2)								ENTITY		OTHE	RTHAN
	TOTAL CLAIMS			The Mark		(Octobrill 2)		TYPE	are we start		RASMAL	and the second
F	OR		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F			RATE	
ŀ	OTAL CHARGEABLE CLAIMS		1 0 1	2 (minus 20=		. 🗸					BASIC FE	-
IN	DEPENDENT CLAIMS		7	2 minus 3 =		•		X\$ 9:		OF	X\$18=	144
MULTIPLE DEPENDENT CLAIM PE								X40=	<u> </u>	OF	X80=	
•	If the different							+135=		OF	+270=	220
				ess than zero, enter "0" in column 2 MENDED - PART II			L	TOTAL		OR	TOTAL	440
	!					OTHE	THAN					
A	T	(Column 1)		(Colum		(Column 3)		SMALI	ENTITY		SMALL	ENTITY
AMENDMENT,		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	USLY	PRESENT EXTRA		RATE	ADDI TIONA FEE		RATE	ADDI- TIONAL FEE
END	Total	ļ·	Minus Minus	••		=		X\$ 9=		OR	X\$18=	
AM	Independent FIRST PRES	FIRST PRESENTATION OF ML			<u> </u>	=		X40=		OR	X80=	
	1	ENTATION OF M	OLTIPLE DE	PENDENT	CLAIM		r	+135=	1		070	
							L	TOTAL	 	OR	+270= TOTAL	
		(Column 1)		(Columr	. 2)	(Column 0)	AC	DIT. FEE		JOR ,	ADDIT. FEE	
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	Harris III	HIGHES NUMBE PREVIOU PAID FO	ST R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	••		=		X\$ 9=		OR	X\$18=	
7	Independent	<u> </u>	Minus	•••		Z	\vdash	X40=		1 1	X80=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT C	LAIM		\vdash		 	OR	∧ou=	
							L	135=		OR	+270=	
							ADI	TOTAL DIT: FEE		OR ,	TOTAL DDIT FEE	
Ţ	· j	(Column 1) CLAIMS	e Soundaria	(Column HIGHES		(Column 3)						
י	e Brown	REMAINING AFTER AMENDMENT		NUMBER PREVIOUS PAID FO	R SLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	fotal	•	Minus	**		=	×	(\$ 9=			X\$18=	766
-	ndependent		Minus	•••		=	-	(40=		OR		
1,	INST PRESEN	NTATION OF MU	LTIPLE DEP	ENDENT CL	AIM		F	\ -		OR	X80=	
If t	he entry in colum	n 1 is less than the	entry in colum	n 2 write "0"	in colu	no 3	+	135=		OR	+270=	
*II t	he "Highest Num	ber Previously Paid ber Previously Paid per Previously Paid	For IN THIS	SPACE is les	s than :	20, enter "20."	ADD	TOTAL IT. FEE	roprioto ha	OR A	TOTAL DDIT. FEE	

FORM PTO-875 (Rev. 8/00) 8kc